



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: COLUMBUS SPECIALTY SURGERY CENTER

Street Address: 2425 NorthPark Drive. Ste 20

City: Columbus

County: IN

Administrator Name: Nikki Turner

Administrator Email: nturner@columbusspecialty.com

ASC Web Address:

Fiscal Year: 20

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	2
Number of procedure rooms	0

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	2,238	6,722
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
30140	406	
69436	275	
76942	230	
31267	225	
31253	199	
31288	197	
64721	167	

64415	164
29827	154
31000	131

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	1
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